BEAVER COUNTY

APPLICATION FOR CONCEPT PLAN REVIEW

DATE	NAME OF APPLICANT	
followi attache	ADDRESS	for on the
avoid p	lanning and development problems for both myself and Beaver County.	, care as a same
	SIGNATURE	
2. 3. 4. 5. 6. 7. 8.	Name of Subdivision Scale - not less than one inch equals four hundred feet Number of lots and approximate sizes Existing and proposed streets Existing and proposed utilities Vicinity map of subdivision Water and/or drainage courses Concept Plan Review Fee (\$20 per Plan Review) G ADMINISTRATOR COMMENTS:	
Approv	al by Zoning Administrator: Date:	
PLAN	VING COMMISSION COMMENTS:	
Approv	ral by Planning Commission: Date:	
Fee's p	nid: Date:	

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